

Joseph H. Kaplan Uxbridge Town Clerk 21 S. Main Street *Uxbridge, MA 01569 Tel. 508-278-3156 Fax. 508-278-3154*

Vital Records – Public Requests Form for use in calendar year 2008

Birth Name	Date of Birth	# requested	Total Cost
Death Certificates - \$5 each certifie	d copy		
Name of Deceased	Date of Death	# requested	Total Cost
Marriage Certificates - \$5 each cert	ified copy		
Original Names of Couple	Marriage Date	# requested	Total Cost
T 1 11 C	D		. 1.0
Total # of certificates requested:	Date of request:	To	tal Cost:
Records on file will be available in	the Town Clerk's Offic	re 10 days after	receipt of
request with payment. If the record		•	
10 days of receipt of request. Reco			•
refund.	·	•	
If you are mailing your request, incl		-	-
check made payable to The Town o	f Uxbridge, at \$5 per c	ertified copy re	quested.
If you are making your request in po	erson vou must make v	your check nava	able to the
Town of Uxbridge at the time of rec		our eneck pays	tole to the
Name of Requestor:			
Address of Requestor:			
Phone Number of Requestor:			
Email Address of Requestor:			